MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO | FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1										
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TOTAL IND.	4									
TOTAL DEP.	18									
TOTAL CLAIMS	22									

	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS